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**SOME PSYCHOMETRICALLY DETERMINED SEQUELAE OF
SEXUAL ABUSE IN ADOLESCENT MALE VICTIMS**

**A Thesis
Presented to the
Faculty of
California State
University, San Bernardino**

**In Partial Fulfillment
of the Requirements for the Degree
Master of Science
in
Psychology**

**by
Stephen A. Gray
December 1985**

SOME PSYCHOMETRICALLY DETERMINED SEQUELAE OF
SEXUAL ABUSE IN ADOLESCENT MALE VICTIMS

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Approved by:

Chair

Date

December 13, 1985

ABSTRACT

Sexually abused males have generally been ignored in the literature on sexual abuse victims which consists primarily of anecdotal studies or surveys. This thesis addresses this lack and attempts to determine psychometrically some of the sequelae of sexual abuse for this population, and compares them to abused females, non-abused males and non-abused females. The School Motivation Analysis Test and the clinical scales of the Clinical Analysis Questionnaire were administered to 13 sexually abused adolescent males, 16 sexually abused adolescent females, 14 non-abused adolescent males and 21 non-abused adolescent females. The results of these tests were examined through the use of factorial analyses of covariance, with age and socioeconomic status used as covariates. The results indicated that sexually abused adolescents, both male and female, experience significantly more pain than non-abused adolescents. As compared to the non-abused adolescents, the abused subjects had more somatic concerns, thought more about self destruction, felt more shaky and anxious, were more troubled with guilt feelings, were more isolated from

other people, were more suspicious of others, had more impulses they felt were bizarre, had greater difficulty getting worries out of their minds and had lower opinions of their self-worth. Abused females were also found to be less assertive and more passive than any of the other groups, which, it is suggested, may contribute to the possibility of their revictimization in the future.

Abused males were found to be less concerned with their social reputation than the non-abused males, which is felt to contribute to the possibility that they may be more likely to become abusers in the future by removing one of the barriers to sexual abuse: social opinion. Although the sequelae of sexual abuse are very similar for male and female adolescents, they may still express those sequelae differently and require different therapeutic techniques.

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INTRODUCTION

In recent years child sexual abuse has come more into both public and professional awareness as a relatively common occurrence in real life, rather than a myth or the product of subconscious strivings. With this realization has come a marked increase in published works on the topic. Almost all of these works, however, are limited to female victims. While some may make a passing reference to male victims these works tend to concentrate exclusively on female victims, saying, if they speak to the issue at all, that little is known of male victims and/or few exist (Henderson, 1975; Rist, 1979). Some works make statements that refer to sexually abused children in general but use the feminine pronoun (Bass & Thornton, 1983; Butler, 1980; De Francis, 1971; Forward & Buck, 1978; Krieger & Robbins, 1985; Pittman, 1977; Sanford, 1980). Such gender role stereotyping could help promote the very paucity of research on male victims that exists.

This downplay of male victimization is similar to the treatment given female victims in the literature a number of years ago. Sloane and Karpinski (1942), for instance,

reported the then accepted belief that in pre-pubertal incest female victims unconsciously desire the sexual activity and that adult-child sex is not basically harmful. Bender and Blau (1937) report frequently considering the possibility that the child was the seducer rather than the seduced victim. Kinsey (1948, 1953) believed that incest was found more in the mind of the therapist than the life experience of the patient in spite of the fact that 24% of his sample of women reported having been subjected to some type of sexual victimization. Kinsey wondered why children should find genital fondling upsetting, aside from cultural conditioning.

Regarding boys, Pittman (1977) states that it is not uncommon for a boy to be initiated sexually by an adult female relative and that this experience, "is usually recalled as a favor" (p. 130). He does note, however, that father-son incest is particularly traumatic. For the most part, current works, with a few notable exceptions, simply ignore male victimization. Published articles that deal with male sexual abuse victims are as difficult to locate as were articles dealing with female sexual abuse victims prior to the 1960s.

Possible reasons for the discrepancy between the reported rates of sexual abuse for males and females will be explored although first there will be a discussion of

problems of definition and an operational definition will be established for this thesis. A discussion of the known sequelae of child sexual abuse for female victims will follow, as well as a discussion of the possible reasons for the discrepancy in the reported rates of sexual abuse of males and females. Finally, there will be a discussion of several hypotheses on some of the possible consequences of sexual abuse for male victims.

Definition

A major difficulty in discussing child sexual abuse is one of definition. Although presently there is general agreement among the majority of authors that adult-child sex is abusive, this has not always been the case and there remain authors who would not agree to label all adult-child sex as abusive (Oremland & Oremland, 1977; Pittman, 1977). Such authors are generally proponents of sexual openness in the family and favor the relaxing of traditional inhibitions in order to promote improved sexual adjustment in children (Oremland & Oremland, 1977). They tend to prefer a more neutral term such as, "adult-child sexual experiences" (Kinsey, 1953). Although Maisch (1972) uses the terms "victim" and "offender" he makes it clear that these terms are used by convention and no value judgment is implied. The issue regarding the labeling of adult-child sex is a critical one because it colors our entire perception of child sexual abuse. The

terms "abuse" and "victimization" will be used here in preference to the more neutral terms.

As Finkelhor (1979b) has pointed out, the standard for sexual relations is one of informed, voluntary consent, without which a sexual relationship is unethical. Children are ignorant of many aspects of a sexual relationship so their consent cannot be informed. They are almost always unaware of how society will view such behavior, what the possible future consequences may be for them, what criteria should be used to choose a sex partner and what the likely course of sexual intimacy will be over time.

In addition to the consideration of the informed nature of the consent, it must also be voluntary. Although children may cooperate in the sexual activity, they cannot consent, and are not free to say, "no." Adults control all the resources that are important to a child, especially if they are closely related to the child; they control physical resources such as food, shelter, clothing, and money, and emotional resources such as attention and affection. Adults are also usually physically larger than children and are capable of inflicting physical pain. Therefore, for physical and, more importantly, psychological and emotional reasons, children cannot consent to sexual activity. Since children are not capable of giving an informed, voluntary

consent, any sexual activity between an adult and a child is, by definition, abusive and the child is victimized (Butler, 1978; De Francis, 1971; Finkelhor, 1979a, 1979b; Forward & Buck, 1978; Sgroi, Blick & Porter, 1982; Tsai & Wagner, 1978).

The greater difficulty in defining child sexual abuse revolves around deciding exactly which acts are sexual and how to distinguish those acts from non-sexual but similar acts. For instance, how does one distinguish between abusive exhibitionism and a non-abusive, casual attitude toward household nudity? Is photographing boys age 10-13 clothed from the waist down, but naked from the waist up, child molestation? An elementary school teacher was recently convicted of child molestation by a jury for such photographs of his students (Rodriguez, 1983). This conviction may have occurred because he had several hundred of them, because he had them hidden, and/or because he was seen as violating the trust placed in him as a teacher. Nevertheless, this case illustrates the difficulty of defining sexual acts.

One solution to this problem is to limit the definition to physical contact which involves the genitals or clearly sexually related areas of the body (De Francis, 1969). Sgroi, Blick and Porter (1982) on the other hand, list 14 areas of sexually abusive behaviors. Several of these areas involve no physical contact, such as nudity,

disrobing, genital exposure and voyeurism of the child. A fifth area is kissing which they define as being sexually abusive when done in "a lingering and intimate way" (p. 11).

While attempting to limit the definition to clearly sexual physical contact, such as contact that involves the genitals of either participant, has the advantage of not including ambiguous acts, it has the disadvantage of leaving out sexually intended behaviors (e.g. exhibitionism and voyeurism). To say that these behaviors may be left out of a definition because they are less harmful to the victim is to place sexual acts on an adult hierarchy; a hierarchy which begins with offenses that do not involve physical contact and culminates with intercourse. Children may have a different hierarchy for determining level of harm; one which takes into account factors such as the duration of the abuse, the age at which the abuse began, the frequency of the abuse, the closeness of the abuser (close or distant relative, stranger, friend of the family, etc.) and whether force was used or threatened (Courtois & Watts, 1982; Elwell, 1979; Finkelhor, 1979a; Sanford, 1980) as well as the nature of the acts themselves. In addition, harm cannot be the criteria in light of the fact that it is unlikely that all sexual acts are inevitably or universally harmful (Landis, 1956; Pittman, 1977). We must look elsewhere to

determine whether a given act is sexual.

The difficulty of a more inclusive definition, such as that of Sgroi, Blick and Porter (1982) is that there is more room for ambiguity. For example, how does one distinguish between a casual attitude toward nudity and sexually abusive exposure, or an affectionate kiss and a sexually abusive kiss? The question is one of intent: what was the motivation for the adult's behavior? This is clearly an internal state which cannot always be correctly classified based on observable behavior. It seems that the abuser is frequently strongly motivated to deny any sexual intent so his or her statements often cannot be accepted at face value. That leaves only the victim who may also be motivated to be dishonest and/or may be prone to misinterpret the perpetrator's intent due to her or his naivete or defenses.

Finkelhor (1979a), however, suggests that the naivete of children is more likely to cause them to miss sexually intended behaviors than it is to cause them to ascribe sexuality to questionable behaviors. He reports that he found children to be very accurate in their interpretation of adults' behaviors. Even when they were too young to label the behavior as being sexual, "they knew the activity was different, it was taboo, it involved visceral sensations, and it should be done covertly and not mentioned" (p. 48). Conte and Berliner (1981) likewise

report that there is no evidence to support the idea that children falsely report sexual abuse. Thus, although there is admittedly a great deal of subjectivity involved, it would appear appropriate to include such behaviors in a definition of sexually abusive behaviors, relying on the victim's judgment in the absence of any good evidence contradicting that judgment to determine whether a given act was "sexual". It should be noted that this issue may be academic. Many, if not most, sexual abuse victims tell no one about obviously abusive behaviors (Burgess, Groth & McCausland, 1981; Butler, 1980; Chaneles, 1967; De Francis, 1971; Elwell, 1979; Finkelhor, 1979a; Herman & Hirschman, 1981; Landis, 1956; Sanford, 1980). It is unlikely that ambiguity will be an issue in many reported cases.

For the purposes of this study, then, the definition of child sexual abuse will be in general agreement with those of Finkelhor (1979a) and Sgroi, Blick and Porter (1982). Child sexual abuse will be defined as any sexual act, including those that involve no physical contact, between a pre-pubertal child (under 13) and any person at least five years older than the child or, if the child is an adolescent (13-17), with a person at least ten years older. It is recognized that these age limits are somewhat arbitrary and sexual abuse can occur outside these bounds. We can be confident, however, that abuse

has occurred within these bounds so, for the purposes of this study, this will be the operational definition.

Sequelae: Female Victims

The exact proportion of child sexual abuse victims who experience negative sequelae is not clear. While a small percentage (10-20%) give the appearance of not being harmed by the abuse (Landis, 1956; Pittman, 1977) it appears that the majority experience negative consequences. Since males are so underrepresented in the literature it cannot be said with any degree of assurance what consequences they experience. However, female victims have been found to experience a common pattern of sequelae: guilt, low self esteem, depression, fear and anger, each of which is discussed individually below.

Female sexual abuse victims frequently feel very guilty about the experience (Armstrong, 1978; Bass & Thornton, 1983; Butler, 1978; Conte & Berliner, 1981; De Francis, 1971; Finkelhor, 1979a; Forward & Buck, 1978; Henderson, 1975; Justice & Justice, 1979; Kaufman, Peck & Tagiuri, 1954; Krieger & Robbins, 1985; Maisch, 1972; Porter, Blick & Sgroi, 1982; Sloane & Karpinski, 1942; Summit & Kryso, 1978; Tsai & Wagner, 1978). Porter et al. (1982) discuss three aspects of this guilt. First, many girls accept responsibility for the inappropriate sexual activity. It is possible that the reaction of others plays a significant role in this aspect. Suspicion is

frequently cast on any victim of a sexual offense and the question is asked (though not always verbally) what the victim did to bring that behavior on themselves (Conte & Berliner, 1981; Justice & Justice, 1979). The second aspect of the girl's guilt centers around her acceptance of the responsibility for the disclosure. She feels guilty for having betrayed the trust of the abuser who almost always emphasizes to the girl the need for secrecy. In the third aspect the girl assumes responsibility for the disruption which follows as a result of the disclosure. This disruption is greatest when the abuse is intrafamilial but also occurs in varying degrees with abuse perpetrated by more distant relatives, friends of the family or even strangers (Chaneles, 1967; Conte & Berliner, 1981; De Francis, 1971; Elwell, 1979; Finkelhor, 1979a; Landis, 1956). Since the clear majority of sexual abuse perpetrators are related to or close to the girl (Burgess et al., 1981; Chaneles, 1967; Conte & Berliner, 1981; De Francis 1971; Finkelhor, 1979a; Groth, 1982) the majority of sexually abused girls would experience the greater disruption and guilt of intrafamilial abuse.

② Low self esteem is another commonly reported consequence of child sexual abuse of females (Armstrong, 1978; Bass & Thornton, 1983; Butler, 1978; Courtois & Watts, 1982; Forward & Buck, 1978; James & Meyerding, 1977; Justice & Justice, 1979; Krieger & Robbins, 1985;

Matsch, 1972; Palladino & Levin, 1979; Summit & Kryso, 1978; Tsai & Wagner, 1978). Victims tend to see themselves as "different" from other people in a negative way (Courtois & Watts, 1982; Finkelhor, 1979a; Porter et al., 1982). Porter et al. (1982) call this the "damaged goods syndrome" (p. 112) and describe how children frequently believe they are damaged and they are frequently treated by adults as though they are different or "damaged goods."

② Related to the low self esteem and also frequently reported is the feeling of depression (Armstrong, 1978; Bass & Thornton, 1983; Browning & Boatman, 1977; Butler, 1980; Forward & Buck, 1978; Henderson, 1975; Justice & Justice, 1979; Kaufman, et al., 1954; Krieger & Robbins, 1985; Matsch, 1972; Rist, 1979; Porter et al., 1982; Tsai & Wagner, 1978). Depression appears to vary in both intensity and duration. For some girls it appears that the depression is mild and arises only in temporal proximity to the disclosure of the sexual abuse. For others the depression is evident long before there is any disclosure. Some girls battle recurring bouts with depression into adulthood, long after the sexual abuse has stopped.

③ Fear is another common reaction of girls who have been sexually abused (Armstrong, 1978; Bass & Thornton, 1983; Browning & Boatman, 1977; Butler, 1978, 1980;

Finkelhor, 1979a; Forward & Buck, 1978; Justice & Justice, 1979; Porter et al., 1982). Some fear ill-defined internal damage or some type of detriment to future sexual relations. (This last fear is a very common result in reality [Armstrong, 1978; Bass & Thornton, 1983; Courtois & Watts, 1982; James & Meyerding, 1977; Meiselman, 1980; Tsai & Wagner, 1978] but is due to the psychological and emotional trauma rather than the feared physical damage.) Some female victims also fear continued (or resumed) physical abuse and/or some type of reprisal by the abuser. Lack of trust in adults in general and an inordinate fear of men in particular (when the abuser is male) also sometimes result from the sexual abuse.

Anger is another common response of girls to child sexual abuse (Armstrong, 1978; Bass & Thornton, 1983; Browning & Boatman, 1977; Butler, 1978; Finkelhor, 1979a; Porter et al., 1982). Frequently this anger is repressed and is not immediately obvious. This would appear to be an understandable response by a girl who has had experience which graphically demonstrates her lack of power and the fact that she is at the complete mercy of the adults in her life. Expressing anger would probably not be a safe thing to do. Frequently her anger is felt not only for the abuser but also toward non-abusing family members for failing to protect her. Depending on the response of police, social workers, attorneys, the court,

the school, and others, the girl's anger may be much more generalized. Sometimes her anger is acted out in aggressive behavior toward others.

Numerous behavioral symptoms are identified in the literature such as sleep disturbance, nightmares, self destructive behavior, running away from home, drug abuse, promiscuity, withdrawal, regression, prostitution and suicidal thoughts or attempts (Armstrong, 1978; Bass & Thornton, 1983; Burgess et al., 1981; Butler, 1978; Chaneles, 1967; Courtois & Watts, 1982; De Francis, 1971; Finkelhor, 1979a; Herman & Hirschman, 1981; James & Meyerding, 1977; Kaufman et al., 1954; Maisch, 1972; Sgroi, Porter & Blick, 1982; Sloane & Karpinski, 1942). The emotional sequelae discussed above can be seen as the likely sources of such behaviors. Finkelhor and Browne (1985) suggest that four dynamics, what they term traumagenic dynamics, lead to the emotional sequelae. Those dynamics are traumatic sexualization, betrayal, powerlessness and stigmatization. As yet, no instruments exist on which such dynamics could be measured.

Lack Of Knowledge Regarding Male Victims

One possible reason for the lack of research on male victims would be a significantly lower rate of victimization for males (Awad, 1976; De Francis, 1969; Henderson, 1975; Langsley, Schwartz & Fairbairn, 1968; Raybin, 1969; Rist, 1979). If males are rarely sexually

abused, the literature may simply reflect reality and does not downplay or ignore the sexual abuse of males. Estimating the incidence of child sexual abuse is problematic and is complicated by the readily acknowledged fact that, in all likelihood, the majority of incidents go unreported. Surveys are of some help here but introduce problems of their own, especially surveys dealing with sensitive issues. There are problems such as forcing complex experiences into discrete categories, a total reliance on the subjects' own perceptions and willingness or ability to report them, and selection factors that lead to an unrepresentative sample. Much of the current literature continues to rely on the classic 1969 study by the American Humane Association (De Francis, 1969), in which 3,000 cases of sexually abused children were found annually in New York City alone. The ratio of female to male victims was 10:1. These figures were based on a study of validated cases reported to local authorities. Based on this study it would appear that males are abused at a significantly lower rate than females. Lower estimates of male abuse, however, could simply reflect differential reporting rates between males and females, including self-reporting in surveys, rather than differential rates of abuse. There are indications that the abuse rates of boys and girls is not as discrepant as reported by De Francis

(1969). In New York City, boy prostitutes were found to outnumber girl prostitutes by two to one (Lloyd, 1976). Sanford (1980) and Justice and Justice (1979) suggest that many of these boys are sexually abused prior to the ongoing abuse inherent in their prostitution. Landis (1956) administered 1,800 questionnaires to college students between 1951 and 1953 and found that 35% of the women in his sample reported at least one sexually abusive experience; 30% of the men reported the same experience. This is a ratio of just under 1.2:1. Finkelhor in his survey of 796 New England college students found that 19.2% of the females and 8.6% of the males reported having been sexually victimized as children (Finkelhor, 1979a). This reduces the ratio of female to male victims from 10:1 to almost 2.2:1.

In 1978-1979 in Knox County, Tennessee, a taped telephone message providing information on child sexual victimization was made available to the community. If the caller wished, she or he could remain on the phone and at the end of the tape a counselor would come on the line to discuss his/her problem. In a twelve month period, 381 reports of child sexual victimization were made over this phone line, double the number made to the Knox County Department of Human Services (DHS) in the same time period. While the percentage of male victims reported to the Knox County DHS (7.5%) was in keeping with the

generally accepted estimates of male victimization found by De Francis (1969), the percentage of male victims reported through the phone line (37.2%) was significantly higher than the percentage reported to DHS (Thomas, Johnson & Bransford, 1981). This study yields a female to male ratio of approximately 1.7:1.

In 1976 the Oakland County, Michigan, Homicide Task Force responded to the molestation and murder of four children (two female, two male) ages 10-12. One of the programs they instituted was the establishment of school personnel as contact persons for those children ages 10-13 who were sexually abused by an adult. Prior to the establishment of this program 74% of the reported cases of child sexual abuse had female victims and 17% had male victims. No data was available for 9% of the cases. Again, this was in keeping with the data found by De Francis (1969). In the year following the establishment of the above program, 782 cases of child sexual abuse were reported to the police. Female victims constituted 51% of the victims, 46% were male victims and no data was available for 3% (Groth & Birnbaum, 1979). In this study the ratio of female to male victims was almost 1:1.

While the above studies cannot be said to constitute proof of higher levels of male sexual abuse than currently believed, they do give rise to serious doubts regarding

the currently accepted discrepancy between the estimated rates of male and female sexual abuse. If the actual rate of abuse of males and females is not as discrepant as commonly accepted we must look elsewhere to understand this apparent lack of male victims. It is possible that sexual abuse is not as traumatic for males as it is for females, and therefore males are less likely to report their abuse. Landis (1956) found that 39.3% of the males in his sample reported their initial reaction to the incident was not traumatic. In contrast, only 16.7% of the females did not feel their initial reaction was traumatic. In a related question, 78% of the men but only 41.6% of the women reported it had taken them little or no time to recover from the emotional shock of the incident. Regarding perceived emotional damage, 81% of the men and 66% of the women thought there had been none; 19% of the men and 30% of the women thought there had been temporary damage; and 3% of the women believed there had been permanent emotional damage. None of the men fell in this category.

Finkelhor (1979a) found that in his sample of sexually abused people, 44% of the experiences of the women were with older family members while this was true only 17% of the time for men. To the extent that abuse by family members is more traumatic than abuse by strangers (Chaneles, 1967; Conte & Berliner, 1981; De Francis, 1971;

Elwell, 1979; Finkelhor, 1979a; Landis, 1956; Sanford, 1980), the women's experiences would be more traumatic. In fact, the men in his sample rated their experience as being less traumatic, overall, than did the women. Finkelhor notes, however, that his data regarding males may be influenced by guilt and denial. If there is good reason to believe there may be such an influence that affects males more than females the above data becomes somewhat suspect since it is based on self reports. Male sex role theory would suggest that Landis' (1956) and Finkelhor's (1979a) data regarding males may very likely have been influenced by guilt and denial. There is no room in the traditional male sex role to be a sexual abuse victim. Men are traditionally supposed to be strong, self-reliant, capable of protecting themselves, sexually aggressive and to eschew anything that appears to be "sissy" (Goldberg, 1976, 1979; Hartley, 1974; Jourard, 1974; Sanford, 1980). To be a male sexual abuse victim means being apparently weak, incapable of protecting oneself, dependent and sexually passive. Butler (1978) reports of one male victim who stated the sequelae of the abuse made him feel, "just like a girl" (p. 36). This may lead to a powerful resistance to reporting the assault. In the rape literature, male victims have reported failing to notify authorities because of societal definitions of masculinity, and their own fears that their masculinity

and/or heterosexuality was now suspect (Groth & Burgess, 1980; Kaufman, Divasto, Jackson, Voorhees & Christy, 1980).

In the only study found speaking directly to the issue of the fears male sexual abuse victims have of reporting their victimization, Nasjleti (1980) reported the male incest victims in her sample expressed one or more of eight fears regarding reporting their own victimization: (a) being considered unmanly for failing to protect themselves; (b) being considered homosexual because of the abuse or the abuse making them homosexual if abused by a male; (c) masculinity questioned if abused by a female; (d) being mentally ill if abused by their mother; (e) not being believed because sexual abuse of boys is thought to be so rare; (f) being ashamed they were unable to protect themselves; (g) nothing being done to help them because many believe such sexual abuse is not harmful to boys; (h) being physically harmed by the abuser who frequently threatened the boys with physical injury. Nasjleti is of the opinion that it is harder for boys to report their sexual abuse than it is for girls to do so, although it is clearly difficult for either sex. She also believes that the resistance to discussing the abuse or their feelings was extreme. Sanford (1980) also suggests that there is more underreporting of male sexual abuse because boys would not tell anyone of their victimization.

This factor may be more significant when the abuser is female rather than male (Fiore, 1985).

Nasjleti attributes this extreme resistance to the socialized male sex role which does not allow males to express feelings (except of anger), ask for nurturance, respond passively to aggression or be dependent on others (Goldberg, 1976, 1979; Hartley, 1974; Nasjleti, 1980). Goldberg (1979) points out how antithetical these characteristics are to therapy which is often characterized by a dependent relationship in which the client is expected to be self-disclosing about their weaknesses, fears and other "feminine" attributes. Since boys are socialized earlier and more vigorously than girls into their expected sex-role (Hartley, 1974) it would be expected that even very young boys would be loath to either report their victimization or cooperate with therapeutic attempts to help them deal with the sequelae of their victimization. In fact, the "toughness" that is required of men in our society could very well lead to the denial of negative sequelae that has been found by some researchers conducting surveys (Finkelhor, 1979a; Landis, 1956).

This evidence, then leads to three major conclusions. First, there very likely are male sexual abuse victims in significant numbers, possibly in numbers similar to the number of female victims. Secondly, a significantly

higher percentage of male victims as compared to female victims may fail to report or seek treatment for the abuse. Finally, these victims may be highly motivated to deny or minimize the consequences of their abuse.

Sequelae: Male Victims

It cannot be said with any degree of certainty to what extent, if any, the sequelae experienced by female victims are also experienced by male victims. The majority of the literature that exists on male victims consists of anecdotal case reports. Although much of the literature regarding female victims is also anecdotal, a sufficient number of females have been studied that we can be considerably far more certain of the consequences for female victims than we can for male victims. Several of the reports found on males are primarily concerned with the dynamics of the family as a whole and mention only in passing some of the consequences for the victim (Awad, 1976; Langsley et al., 1968; Raybin, 1969). Dixon, Arnold and Calestro (1978) studied six male incest victims who had been abused by their fathers ($n = 4$) or step fathers ($n = 2$) and found intense anger at the fathers, sometimes expressed as homicidal wishes. Four of their six subjects reported homicidal and/or suicidal ideation, and three had a history of self destructiveness. It could be predicted, based on male sex role theory, that male sexual abuse victims would be very angry since anger is one emotion

that is traditionally acceptable for males (Goldberg, 1976, 1979). Since males are more aggressive than females (Goldberg, 1976, 1979; Jourard, 1974; Pleck, 1981; Whiting & Edwards, 1973) it could be expected that this anger would be more likely to be acted out than the anger experienced by female victims.

It may also be that males are more fearful than are females who are sexually abused. According to Ellerstein and Canavan (1980) boys are more likely to be injured than are girls and therefore could be expected to be more fearful. This fear would quite possibly be suppressed, however, because fear is an "unmanly" emotion (Goldberg, 1976, 1979; Hartley, 1974; Jourard, 1974). It is also possible that it is primarily those males who are more seriously abused that come to the attention of the authorities and the true percentage of injured boys is more similar to that of injured girls but that the uninjured boys are less likely to report the sexual abuse than are uninjured girls (Nasjelti, 1980). The finding of a higher rate of injury for sexually abused boys would thus be an artifact and boys would not be likely to be more fearful than girls.

The occurrence and significance of depression, self-esteem and guilt are also problematic. It would certainly appear reasonable to believe that, given similar experiences, boys would experience these consequences as

do girls. It would also appear likely to expect that boys would strongly defend against such feelings because they are "unmanly" (Goldberg, 1976, 1979; Hartley, 1974; Pleck, 1981). Forward and Buck (1978) suggest that the victim of mother-son incest experiences "crushing guilt feelings" (p. 75) because there is no force involved but the mother is tender and seductive. Sanford (1980) also suggests these victims experience "overwhelming guilt" (p. 193). Since it appears that the clear majority of people who sexually abuse children are male (Armstrong, 1978; Bass & Thornton, 1983; Browning & Boatman, 1977; Butler, 1978; Chantrel, 1967; De Francis, 1969; Finkelhor, 1979a; Groth & Birnbaum, 1979; Sanford, 1980) the experience of most boys would primarily be homosexual rather than heterosexual. There are some indications, however, that cast some doubt on the accuracy of our data. Fiore (1985) reports that 30%-60% of male molesters were sexually abused themselves as children by females. It may be that boys who are sexually abused by a female are even less likely to report this abuse than those who are abused by males.

For those who are abused by males, the homosexual nature of the abuse would appear to complicate the boys' experience because male homosexuality is so feared and stigmatized (Clark, 1974; Levitt & Klassen, 1974; Miller, 1983). Groth and Burgess (1980), Kaufman et al. (1980)

and Nasjleti (1980) all confirm that the homosexual nature of the sexual victimization complicated the negative reaction of the male victims. Pierce and Pierce (1985) note that many boys fear that if they are abused homosexually they will become homosexual and that if they were forced into the abuse their weakness has been confirmed. Forward and Buck (1978) and Sanford (1980) suggest that the guilt experienced by all incest victims is compounded in father-son incest by the hatred of his father and therefore the hatred of himself, because the victim, as a boy, identifies so closely with his father. It could certainly be anticipated that male victims would also experience the depression, low self-esteem and guilt commonly experienced by female victims and a few authors believe the guilt may be more intense.

Statement of the Problem

It is the intent of this thesis to examine the sequelae of child sexual abuse for adolescent male victims and compare them to the characteristics of female victims and with non-abused male and female adolescents. It is hypothesized that: (a) both male and female sexual abuse victims will demonstrate increased levels of guilt, poor self esteem, depression, fear and anger as compared to non-abused male and female adolescents (Armstrong, 1978; Bass & Thornton, 1983; Browning & Boatman, 1977; Butler, 1978, 1980; Conte & Berliner, 1981; Courtois & Watts,

1982; De Francis, 1971; Dixon et al., 1978; Finkelhor, 1979a; Forward & Buck, 1978; Henderson, 1975; James & Meyerdling, 1977; Justice & Justice, 1979; Kaufman et al., 1954; Maisch, 1972; Palladino & Levin, 1979; Porter et al., 1982; Sanford, 1980; Sgroi, Blick, & Porter, 1982; Sgroi, Porter & Blick, 1982; Sloane & Karpinski, 1942; Summit & Kryso, 1978; Tsai & Wagner, 1978); (b) sexually abused males will have greater anger and more guilt than female victims (Forward & Buck, 1978; Goldberg, 1976, 1979; Sanford, 1980; Whiting & Pope, 1973).

An alternative hypothesis would be the possibility that the primary distinguishing feature of sexual abuse victims is adult sexual difficulties (Meiselman, 1980) and there will be no significant differences among the groups. Levels of fear, depression and self esteem will be investigated in addition to anger and guilt although, based on the current literature, it is not possible to form a directional hypothesis with regard to male and female abuse victims.

METHOD

Subjects

Four groups of approximately 15 subjects each, ages 12-18, were formed. Two groups, one male ($n = 14$) and one female ($n = 21$), consisted of local junior and senior high school students. The junior high students were all enrolled in a life science class at Alta Loma Junior High School and the senior high students were all enrolled in the senior honors class at Alta Loma High School.

Permission to work with these groups was obtained from the school administrator, the classroom teacher, the subjects themselves and their parents.

A group of sexually abused male adolescents ($n = 13$) was drawn from Sons United therapy groups in San Bernardino and Riverside ($n = 7$) and Verdemont Boys Ranch ($n = 6$), a residential treatment program operated by the San Bernardino County Probation Department for adolescent boys who had committed a criminal offense. Permission to work with the Sons United groups was obtained from the therapists who obtained the subjects' consent. Permission to work with the Verdemont Boys Ranch group was obtained from the Director of Clinical Services of the San

Bernardino County Probation Department and the clinical psychologist assigned to the ranch. A group of sexually abused female adolescents ($n = 16$) was drawn from Daughters United therapy groups in San Bernardino and Ontario. Permission to work with these groups was obtained from the therapists. Feedback regarding the test results was given to the therapists of the sexually abused adolescents. Tables one and two present characteristics related to the abused group.

Use of t tests for the other data related to the abused group, including the age of the abuser, the number of times the victims were abused, the timespan over which the abuse occurred, or the age at which the abuse began, revealed no significant differences between male and female abuse victims. The age of the abuser was reported in ranges from 10-15 to over 50. The number of times the victims were abused ranged from one time only to more than 20 times. The reported timespan over which the abuse occurred ranged from one year or less to over five years. The age at which the abuse began was reported in ranges from under age five to ages 13-17. Only two of the 35 abusers were female and therapists reported physical force or violence being used or threatened on only eight of the subjects (5 male, 3 female).

Instruments

Questionnaires. All subjects were given a

Table 1

Relationship of Abuser

Abuser	Victims (n)	
	Male	Female
Father	5	3
Stepfather	3	10
Mother	1	0
Brother	0	1
Aunt	1	0
Uncle	0	1
No Relation	7	2
Other	1	1

Note. The columns total more than the number of abused subjects because some were abused by more than one person.

Table 2

Nature of the Abuse

Type of Abuse	Victims (<u>n</u>)	
	Male	Female
Voyeurism	1	0
Exposure	4	0
Fondling	6	10
Adult Orally Copulated Child	2	4
Child Orally Copulated Adult	3	5
Vaginal Intercourse	0	13
Anal Intercourse	4	0
Digital Penetration of Anus	1	0
Foreign Object Penetration of Anus	1	0
Dry Intercourse	1	0
Other	1	0

Note. The columns total more than the respective number of subjects because some subjects were abused in more than one manner.

multi-dimensional, paper and pencil personality test. The

Questionnaire (Krug, 1980), an objective,

completed the second half of the Clinical Analysis

Clinical Analysis Questionnaire (CAQ). All subjects

it as intrusive.

victim because it was felt that the victim would perceive

began. This was given to the therapist rather than the

abuse occurred and the age of the victim when the abuse

used or threatened, the length of time over which the

of the abuser to the victim, whether force or violence was

penetration of the anus, vagina or penis) the relationship

perpetrator] anal intercourse, digital or foreign object

intercourse [perpetrator on child and/or child on

(voyeurism, exposure, fondling, "dry" intercourse, oral

subjects to ascertain the nature of the abuse experienced

A checklist was presented to the therapist of the abused

parent families the scores of both parents were averaged.

was the final score in one parent families. For two

three for education and then were added together. This

by a factor of five for occupation and by a factor of

assigned a numerical value. These values were multiplied

Each parent's level of education and occupation was

socioeconomic status as described by Hollingshead (1975).

education. The final two items were used to determine

age, sex, race, parental occupation and level of parental

demographic questionnaire to determine the following:

second half has 12 clinical scales (D1-Hypochondriasis, D2-Suicidal Depression, D3-Agitation, D4-Anxious Depression, D5-Low Energy Depression, D6-Guilt and Resentment, D7-Boredom and Withdrawal, Pa-Paranoia, Pp-Psychopathic Deviation, Sc-Schizophrenia, As-Psychasthenia, Ps-Psychological Inadequacy). The first half is essentially a separate test from the second half and is patterned after the 16-PF, yielding scores on normal personality traits. This half of the test was not administered because the clinical scales contained in the second half were the scales that correlated with the traits brought out in the literature. It was also felt that to administer the first half of the instrument, in addition to all the other testing, would place excessive time demands on volunteer subjects. Although this instrument was originally designed for adults the manual does contain normative tables for a clinically diagnosed population of adolescents. It was chosen because, as noted above, its scales correlated closely with the sequelae of abuse as reported in the anecdotal literature and an equivalent measure designed for adolescents could not be found. The CAG was the most appropriate instrument that could be located after consulting Buros (1978) and approximately six local psychologists.

Each subject was presented with three possible answers to each of the questions in the CAG and was

encouraged in the initial directions read to the subjects from the front of the test booklet to select either the first or third answer. Examples given on the front of the test booklet of test items are, "People say I'm intelligent. (a) true (b) uncertain (c) false;" and "I prefer friends who are: (a) quiet (b) in between (c) lively."

Test retest reliabilities reported in the test manual for each of the scales with a one day interval are D1 .85, D2 .74, D3 .85, D4 .73, D5 .75, D6 .71, D7 .67, Pa .86, Pp .84, Sc .90, As .75, Ps .84. The mean reliability coefficient for the 12 clinical scales is .79. The following internal reliability coefficients of each of the scales are offered: D1 .86, D2 .59, D3 .71, D4 .75, D5 .67, D6 .65, D7 .60, Pa .80, Pp .45, Sc .84, As .78, Ps .73. These scales have been correlated with the appropriate scales on the MMPI and with clinical diagnoses. The manual reports, for instance, that on the Hypochondriasis scale a strong correlation has been found with scale 1 (Hs) of the MMPI and that it also correlates highly with scales 2 (D), 7 (Pt), and 0 (Si). It also reports that it appears to be a slightly more important factor in depression for women than for men and that males score lower than females diagnosed as neurotic or schizophrenic.

School Motivation Analysis Test (SMAT). The School

Motivation Analysis Test (Krug, Cattell & Sweney, 1976) was also completed by all subjects. The SMAT is an objective, multi-scaled trait test which takes approximately 1 hour to complete and yields scores on ten traits, six of which are considered primary drives (As-Assertiveness [self-assertion], Ma-Mating [sex drive], Fr-Fear [security-seeking], Na-Narcism, Pg-Pugnacity-Sadism, Pr-Protectiveness) and four of which are considered acquired interest patterns (SS-Self-Sentiment, SE-Superego, Sc-Sentiment to School, Ho-Sentiment to Home). This instrument was selected after reviewing Buros (1978) and after consulting with approximately six local psychologists. It was selected because it is designed for adolescents and it has several scales that speak to issues brought out by the anecdotal literature on sexual abuse victims. Scores are given on each of these traits in 2 directions: Integrated and Unintegrated. According to the manual, the Unintegrated score represents the drive or need level in each trait. Again, according to the manual, the Integrated score reflects the satisfaction, the effort to satisfy the drive or the conscious organized motive strength in each of the trait areas. These 20 scores constitute the primary SMAT scores.

Secondary scores are obtained by summing the Integrated (I) and Unintegrated (U) scores in each trait

(U+I) and then by subtracting (I-U). The summed score indicates the amount of energy invested in each of the traits and is called the Total Motivational score. The subtracted score is called the Conflict score and indicates the amount of drive that exceeds satisfaction in each area.

There are also five derivative scores. The Autism scale represents the general tendency to distort reality; the General Information scale is an estimate of the subject's general intellectual ability; the Total Integration scale is a summary index of high satisfaction relative to drive; the Total Personal Interest scale is a summary index of the subject's overall drive level; and the Total Conflict scale is a summary index of the subject's general frustration level (satisfaction low relative to drive).

The SMAT is divided into three parts. The first part, called "Uses," asks the subject to select the way they would choose to use a given commodity. Examples given on the front of the test booklet of items are, "With several hundred dollars, I would (a) go on an ocean voyage (b) put it in the bank;" and "The weekend is a time for (a) spending extra time with friends (b) helping with chores around the house." The second part is called "Paired Choices" and asks the subject to choose the word that goes most naturally with a stimulus word. Examples

of items given on the front of the test booklet are, "Short (a) stop (b) time;" and "Collect (a) stamps (b) money." The third part is called "Knowledge" and subjects are asked to estimate the answer to the question that is closest to right. Examples of items given on the front of the test booklet are, "Who invented horse racing? (a) Edison (b) Newton (c) Arabs (d) Romans;" and "How many miles is it to London, England, from New York? (a) 500 (b) 1,000 (c) 1,500 (d) 2,000."

Test-retest reliabilities with a one week interval offered by the manual (Krug et al., 1976) range from a low of .32 (SS integrated) to a high of .95 (SS total conflict). Mean reliability of the primary scales is .57 while the mean reliability of the secondary scales is .58. The authors note that motivation scores are less stable than personality or ability scores and hence the reliability coefficients are low. The reliabilities of the derivative scores are: Autism .86 (internal consistency), General Information .88 (internal consistency), Total Integration .92 (test-retest), Total Personal Interest .94 (test-retest), and Total Conflict .94 (test-retest). The test manual reports that the SMAT has been shown to have predictive validity in the area of school achievement. Following, for instance are the predictive validities of SMAT Integrated scores for achievement in seventh grade reading: Mating .46,

Narcism .33, Self-Sentiment .44, Superego .45, School, .42 and Home .37.

Procedure

The instruments were administered by the author to the junior and senior high school students in their classrooms. For the sexually abused subjects the instruments were administered in the setting in which their therapy sessions are normally held except for the subjects from Verdemont Boys Ranch. At Verdemont the ranch psychologist routinely administers both the CAQ and the SMAT to all incoming boys and the data obtained by him at the time of intake of each of the boys was utilized rather than retesting each boy. The demographic data and information regarding the nature of the sexual abuse of the Verdemont boys was extracted from the files of the ranch psychologist. For the other groups of sexually abused adolescents the demographic questionnaire and the CAQ were administered on the same day and the SMAT was administered on another day with the interval between the tests varying from one to five weeks. The junior and senior high school students also took the CAQ and completed the demographic questionnaire on the same day. The SMAT, however, had to be broken into two parts with "Uses" and "Paired Choices" being taken one day and "Knowledge" being completed another day due to time considerations. Both instruments were completed by all

the students within a one week period of time. The order of presentation of the CAG and SMAT was alternated to control for any order effects.

For all subjects except the six from Verdemont Boys Ranch the instruments were administered in the following manner. The test booklets, answer sheets and pencils were distributed to subjects. The test instructions were read by the author and any questions were answered. The non-abused subjects were told simply that the author desired normative data from typical adolescents on these instruments. The abused subjects were told that the results of the tests would be shared with their therapist who would then share with them, that otherwise the results were anonymous and would be used in a study to help therapists in general better understand how to help sexual abuse victims. After the completion of all testing the non-abused subjects were informed of the broader purpose of the study and another opportunity was offered to ask questions. All non-abused subjects were offered the opportunity to request follow-up information regarding the results of the study. This information will be sent to those who requested it.

RESULTS

Two sets of analyses were used to examine the results. First, factorial analyses of variance were conducted over the demographic variables to determine any differences among the groups in the areas of age and socioeconomic status. Secondly, the clinical scales were examined through the use of factorial analyses of covariance to determine whether there were main effects and/or interactions among the four groups (male abused, female abused, male non-abused and female non-abused). Age and socioeconomic status were used as covariates. For the purpose of these analyses raw scores, rather than standardized normative (STEN) scores were used due to the restricted variability of the STENs.

Demographic Variables

The means of the demographic variables are presented in Table 3. Factorial analyses of variance revealed significant main effects for gender on socioeconomic status, $F(1, 58) = 4.00, p < .05$. The females ($M = 47.1$) were found to be of a higher socioeconomic status than the males ($M = 41.1$). The group of non-abused subjects

Demographic Means		
Variable		
Male		
Female		
Abused Subjects		
Age (in years)	14.1	14.9
Socioeconomic Status	33.7	39.2
Non-Abused Subjects		
Age (in years)	16.1	14.5
Socioeconomic Status	47.4	52.7

Table 3

($M = 50.6$) was also found to be of significantly higher socioeconomic status, $F(1, 58) = 25.55, p < .01$, than the abused subjects ($M = 36.7$). Scores for the abused subjects indicate that they reported being from families comprised of workers engaged in skilled crafts, clerical tasks or sales, while the non-abused subjects reported being in families comprised of medium business, minor professional and technical workers.

An abuse by gender interaction on age, $F(1, 58) = 5.56, p < .05$, was found which indicated that the non-abused males ($M = 16.1$) were significantly older than the abused males ($M = 14.1$) while the non-abused females ($M = 14.5$) and abused females ($M = 14.9$) were not significantly different from either group of males. The Tukey HSD procedure (Jaccard, Becker & Wood, 1984) was used for this and all other pairwise multiple comparisons.

Clinical Scales

CAQ Scores. On the Clinical Analysis Questionnaire, a number of significant main effects for abuse were found (see Table 4). Where significant differences were found, the abused group scored higher than did the non-abused group. These results would indicate that the individuals in the abused group had more somatic concerns, thought more about self-destruction, felt more shaky and anxious, were more troubled with guilt feelings, were more isolated from other people and felt more that life is not

Table 4

Abuse Main Effects for Mean CAG Scores

Scale	F	Abused	
		Abused	Non
D1 Hypochondriasis	6.78*	9.3	3.5
D2 Suicidal Depression	4.87*	9.7	3.8
D4 Anxious Depression	4.88*	11.2	7.3
D6 Guilt and Resentment	12.70**	12.3	5.7
D7 Boredom and Withdrawal	5.88*	9.1	4.5
Pa Paranoia	20.52**	12.3	5.7
Sc Schizophrenia	25.46**	11.6	4.7
As Psychasthenia	11.65**	12.2	7.4
Ps Psychological Inadequacy	8.82**	11.5	4.7

Note. All scores were rounded to one decimal place.

df = 1, 56 for all scales.

*p<.05. **p<.01.

worth caring about, were more suspicious, had more bizarre impulses, had greater difficulty getting worries out of their minds and had lower opinions of their self-worth.

Finally, a main effect for gender was found on one scale: the Schizophrenia scale, $F(1, 56) = 4.15, p < .05$. The males ($M = 9.1$) scored higher than the females ($M = 6.7$), indicating that the males had more strange impulses and feelings of unreality.

SMAT Scores: Abuse Main Effects. These scores are reported in Table 5. There were no main effects for abuse among the Unintegrated scores, indicating that in the areas measured, the drive or need level of the abused group did not differ significantly from that of the non-abused group. The Integrated scores reflect the level of satisfaction or the effort exerted to satisfy the drive. There was a tendency for the abused subjects to feel less satisfied or exert less effort in heterosexual areas and there was also a tendency for them to feel less satisfaction in their efforts to resolve their fears. Areas in which the abused group felt significantly less satisfied or exerted significantly less effort to satisfy their needs than the non-abused group included their social reputation, their moral goals and in school. The abused subjects were thus significantly less likely than were the non-abused subjects to try to exert the necessary self-control to make themselves liked by others. They

Table 5

Abuse Main Effects for Mean SMAT Scores

Scale	F	Abused	Non Abused
Integrated Scores			
Ma Mating	3.08*	8.5	9.5
Fr Fear	3.20*	5.2	6.2
SS Self-Sentiment	4.54**	6.7	7.9
SE Superego	7.65***	6.4	8.7
Sc Sentiment to School	4.61**	7.0	8.6
Total Motivation Scores			
SS Self-Sentiment	3.90**	8.7	10.3
SE Superego	6.69***	9.3	12.6
Sc Sentiment to School	5.09**	9.5	11.8
Conflict Scores			
Ma Mating	6.91***	.9	-1.3

Table 5 (continued)

Scale	<u>F</u>	Abused	Non Abused
Derivative Scores			
General Information	17.99***	24.3	34.4
Total Integration	6.93***	-7.3	1.2
Total Personal Interest	11.33***	49.4	55.7
Total Conflict	8.01***	56.9	50.7

Note. All scores were rounded to one decimal place.

df = 1, 56 for all scales.

* $p < .10$. ** $p < .05$. *** $p < .01$.

were significantly less likely to try to live within their values or drive themselves toward moral achievements and they were significantly less likely to exert as much effort to exceed in school related areas.

The Total Motivation scores are the sum of the Integrated and Unintegrated STEN scores and indicate the general level of importance to the individual of each of the traits. Three main effects for abuse were found indicating that social reputation, moral goals and school related issues are all significantly less important to the abused subjects than they are to the non-abused subjects.

The Conflict scores are the result of subtracting the STEN of the Integrated scale from the STEN of the Unintegrated scale and represents the excess of drive over satisfaction or the amount of conflict in each area. One main effect for abuse was found indicating that the abused subjects were significantly more conflicted over heterosexual issues than were the non-abused subjects.

The derivative summary scores are obtained by manipulating a row of scores. The General Information score is obtained by summing across a row of raw scores that contribute to the Integrated scores. The abused subjects scored significantly lower on this device than the non-abused subjects indicating the abused subjects had significantly less general information. The Total Integration score is obtained by summing the Unintegrated

STEN scores and subtracting the result from the summed Integrated STEN scores. The abused subjects scored significantly lower than the non-abused subjects indicating the abused subjects were significantly less satisfied with their lives overall and were less able to satisfy their needs. The Total Personal Interest score is obtained by summing the Total Motivation STEN scores. The abused subjects scored significantly lower than the non-abused subjects indicating that the abused subjects had a more restricted drive or interest level than the non-abused subjects. The Total Conflict score is obtained by summing the Conflict STEN scores. On this device the abused subjects scored significantly higher than the non-abused subjects indicating they felt more conflicted and more frustrated than non-abused subjects.

SMAT Scores: Gender Main Effects. Main effects for gender were found in all expressions of the SMAT scores (Unintegrated, Integrated, Total Motivation and Conflict). These results are reported in Table 6.

SMAT Scores: Interactions. All interactions found in the SMAT are reported in Table 7. Two interactions were found in the Unintegrated scores. The abused females scored significantly lower than the non-abused females on the Unintegrated Assertiveness scale while the non-abused males and the abused males were not significantly different from either group of females, indicating that

Table 6

Gender Main Effects for Mean SMAT Scores

Scale	E	Male	Female
Unintegrated Scores			
Ma Mating	3.92*	30.8	27.5
Integrated Scores			
As Assertiveness	11.48**	7.5	6.3
Ma Mating	12.93**	8.0	9.8
Na Narcism	7.45**	8.1	9.6
Pg Pugnacity	5.96*	8.3	6.8
Pr Protectiveness	10.67**	6.7	8.1
Ho Sentiment to Home	4.10*	6.0	6.9
Total Motivation Scores			
As Assertiveness	4.44*	10.7	10.0
SE Superego	3.99*	12.0	10.5

Table 6 (continued)

Scale	F	Male	Female
Conflict Scores			
Ma Mating	12.64**	.8	-1.1
Pg Pugnacity	4.48*	-1.3	.4

Note. All scores were rounded to one decimal place.

df = 1, 56 for all scales.

* $p < .05$. ** $p < .01$.

Table 7

Interactions for Mean SMAT Scores

Scale	F	Abused		Non-Abused	
		Male	Female	Male	Female
Unintegrated Scores					
As Assertiveness	4.03*	33.8 _{ab}	30.0 _a	34.1 _{ab}	35.8 _b
SS Self-Sentiment	5.11*	24.2 _a	29.2 _{ab}	30.6 _b	28.1 _{ab}
Integrated Scores					
As Assertiveness	6.79**	7.2 _a	5.4 _b	7.8 _a	6.9 _a
Total Motivation Scores					
As Assertiveness	14.20**	10.3 _a	8.0 _b	11.1 _a	11.4 _a
SS Self-Sentiment	6.53**	7.8 _a	9.5 _a	11.6 _b	9.4 _a

Note. For each dependent variable, different subscripts for two conditions indicate that those two conditions were reliably different at the .05 level using Tukey's HSD test.

* $p < .05$. ** $p < .01$.

the abused females had a lower drive or need to be competitive than did the non-abused females. The second interaction found in the Unintegrated scores was on the Self-Sentiment scale. Abused males were found to have scored significantly lower than the non-abused males while the abused females and the non-abused females were not significantly different from either group of males. The abused males thus had a lower drive or need to maintain self-control in a manner to make themselves liked by others; that is, they were less concerned with their social reputation than were the non-abused males.

One interaction was found on the Assertiveness scale of the Integrated scores. The abused females scored significantly lower than any other group indicating that abused females were less assertive and more passive than any other group.

Finally, two interactions were found in the Total Motivation scores on the Assertiveness and Self-Sentiment scales. Once again, the abused females scored significantly lower on the Assertiveness scale than any other group indicating that competitiveness and pre-eminence were significantly less important to the abused females than they were to any of the other groups. On the Self-Sentiment scale the non-abused males scored significantly higher than any of the other groups. This would indicate that social reputation was more important

to the non-abused males than it was to any of the other groups.

DISCUSSION

In reviewing the available literature in the area of child sexual abuse prior to the commencement of this study, it was found that almost all of that literature was anecdotal, and that information regarding male sexual abuse victims was almost non-existent. An effort was made in this study to examine the characteristics of sexually abused adolescents from a different perspective, a psychometric perspective, and to examine a population that had previously received minimal attention, male sexual abuse victims.

Throughout this study reference is made to the "non-abused" group. This group was composed of students who volunteered to take two personality tests and it is entirely possible that a percentage of those students were sexual abuse victims. If current estimates of the rate of sexual abuse are accurate, statistically one-third, or approximately 11 of the 35 subjects in the non-abused group, may have been sexual abuse victims. There are several reasons that no control procedure was instituted for this possibility. One reason is that not only did the lack of such a control procedure not increase the ease of

finding significant differences, in point of fact, it increased the difficulty of finding significance. The result of having abused subjects in the "non-abused" group would be to lessen the difference between the groups and increase the difficulty of finding support for the hypotheses. Where significant results were found it was in spite of this factor. Still another reason that mitigated against such a control procedure was the fact that if a school student did report that they were an abuse victim the author would have been put in the position of being legally required to report that fact to the appropriate law enforcement agency. While not necessarily negative in itself this was not seen as consistent with the author's role in this study. Thirdly, any control procedure instituted to eliminate sexual abuse victims from the non-abused group would have necessarily informed the subjects in the non-abused group of a significant aspect of this study before the administration of the instruments which could have influenced the results.

It is also noted that the non-abused males were almost two years older than the abused males. Although age was used as a covariate, the developmental differences between 14 and 16 year olds might have influenced the results. Noting that the SMAT manual provides norms for all adolescents and does not distinguish among any ages it

is suggested that any such influences were not significant.

Hypotheses

It was reasonably consistently reported in the available literature that sexually abused females experienced increased levels of guilt, poor self esteem, depression, fear and anger as compared to non-abused adolescents. It was therefore hypothesized initially that these characteristics would be found in an adolescent population of male and female sexual abuse victims in levels elevated above those of non-abused adolescents. Based on anecdotal information from a few authors and making inferences from male sex role theory, it was also hypothesized that male victims would evidence levels of guilt and anger that would be elevated above those of female victims. The results of this study generally supported the first hypothesis and no support was found for the second. These results are discussed below.

Anger. The Pugnacity scale of the SMAT was intended to measure the subjects' anger. The trait measured by this scale is described in the SMAT manual (Krug, et al., 1976) as taking its energy from the degree of frustration of other traits and having as its goal "the defeat, obliteration, and destruction of disliked entities" (p. 10). It was anticipated that the abuse victims' anger, especially the intense anger and homicidal wishes

expressed by the male subjects Dixon, et al. (1978) studied, would result in higher scores on the Pugnacity scale. No significant differences were found among any of the groups, however, (with the sole exception of a main effect for gender on the Conflict score of the Pugnacity scale).

There are several possible explanations for this finding. First, it is possible that this finding indicates that sexually abused adolescents do not experience increased levels of anger; to make that suggestion, however, is to ignore a significant body of literature (Armstrong, 1978; Bass & Thornton, 1983; Browning & Boatman, 1977; Butler, 1978; Finkelhor, 1979a; Porter et al., 1982), and therefore seems improbable.

Secondly, it is possible that, since the subjects in this study were in treatment, their treatment had resolved their anger somewhat so that their scores were not elevated above those of the non-abused subjects. While this is possible it appears unlikely in light of the numerous main effects for abuse that were found in other areas. It seems improbable that their treatment would have helped the abused subjects resolve their anger to a significantly greater extent than it had already helped them resolve the other issues for which significant differences were found.

Noting the fact that anger seems to frequently cover

up depression and all the abused subjects had increased levels of depression it is possible that the abused subjects' therapy had helped them get past their anger and they were more in touch with the underlying depression and pain. This suggestion runs counter to the experience of the abused subjects' therapists. Many of the abused subjects were still very angry. One even wrote on the demographic questionnaire for this study, "DAD IS A GEEK!!!" The word "geek" was underlined six times and each exclamation point was larger than the preceding one. It is noted that the literature suggests that abuse victims experience both anger and depression and that especially male victims defend against the "weak" emotions and exhibit anger. This was confirmed in discussions with the therapists of the male victims who participated in this study.

Finally, it is possible that the Pugnacity scale was an inappropriate measure of that anger. If the scale is more sensitive to repressed hostility than overt hostility this could contribute to an explanation of the fact that neither the abused males nor the abused females scored significantly higher on that scale than did the non-abused groups, in spite of the reported experience of the authors listed above. If the Pugnacity scale is an inappropriate measure of the abused victims' anger, then these results do not speak to the original hypothesis that male sexual

abuse victims could be expected to evidence greater anger than female victims or to the hypothesis that both male and female abuse victims would evidence elevated levels of anger as compared to the non-abused subjects.

Guilt. Another hypothesis that was advanced was the possibility that male victims experienced greater guilt than did female victims. The data did not support this hypothesis, either. According to the guilt and resentment scale on the CAG, sexually abused adolescents did feel significantly increased levels of guilt as compared to non-abused adolescents but there was no significant difference between abused males and abused females. Forward and Buck (1978) suggested that this increased level of guilt for males was related to abuse by a female since female perpetrators do not generally use force but rather are more seductive than male perpetrators. Since only two of the reported perpetrators in this study were female, this may be a factor influencing the lack of significant difference between male and female abuse victims. With a few exceptions this was the general finding throughout the study: that sexually abused adolescents' scores indicated more problems than the scores of non-abused adolescents but there were few differences between abused males and abused females.

Depression. Based on the literature suggesting that females are more likely to be depressed than males it

might be expected that male sexual abuse victims would not score as highly on measures of depression as would female victims. This difference was not found. Both male and female abused subjects scored significantly higher on five of the six depression scales on the CAQ (D3 Agitation, is excluded as the test manual explains it is not a true depression factor). Abused subjects were more concerned with somatic complaints, many of which are non-specific and vague. They had more thoughts of self-destruction and felt more that life was empty and meaningless. They were more likely to describe themselves as clumsy and shaky in handling things, lacking in self confidence and subject to disturbing dreams. They were more likely to feel they had committed the unpardonable and felt worthless and guilty. Finally, they were more likely to report feeling that life is not worth caring about and that they tend to avoid interacting with other people.

Fear. The significantly higher score on the Paranoia scale of the CAQ for the abuse subjects was interpreted as an increased level of fear. It is suggested that it is fear that motivates the suspiciousness that is commonly associated with paranoia. It is not difficult to understand why sexual abuse victims would feel more suspicious, persecuted, cynical about human nature and have a greater sense of being the victim of injustice. Their feelings have been disregarded and they have been

most intimately violated usually by someone close to them, someone they trusted. If their experience demonstrates that they cannot trust someone close to them it would make intuitive sense that they would be suspicious and fearful of anybody and everybody. Their paranoia is based on external reality rather than the unique internal reality usually associated with paranoia.

The Fear scale on the SMAT relates more to escaping feelings of fear and finding safety and security than to feeling fearful. Nevertheless, although significance was not reached, there was a tendency for the abused subjects to feel less satisfied with their attempts to resolve feelings of fear, which would result in the subjective feeling of fear.

Self-Esteem. There were two measures of the final hypothesized result of the sexual abuse. Low self esteem was measured by the Psychological Inadequacy scale on the CAQ and the Self Sentiment scale on the SMAT. The abused victims scored significantly higher on the CAQ scale and were thus more likely to describe themselves as "good for nothing" to the point where reality distortions may occur in the area of factual self worth. The test manual states that a high score on this scale is suggestive of Beck's (1967) learned helplessness pattern. Once again, this is not a surprising consequence for a sexual abuse victim.

The results on the SMAT measure of self esteem, the

Self Sentiment scale, were more complex. A main effect for abuse was found on the Integrated Self Sentiment score in which the abused subjects scored lower than the non-abused subjects indicating that the abused subjects were less satisfied with their social reputation or did not try as hard as the non-abused subjects to exert self control in a manner to make themselves liked by others. There was a significant main effect for abuse in the same direction on the Total Motivation score of the Self Sentiment scale indicating that social reputation was significantly less important to the abused subjects than it was to the non-abused subjects. These data were qualified by interactions, which will be discussed later, however, in both the Unintegrated and the Total Motivation scores of the Self Sentiment scale.

Abused males scored significantly lower than the non-abused males on Unintegrated Self Sentiment and they scored significantly lower than non-abused males on the Total Motivation score of the Self Sentiment scale. These data suggest that sexually abused males, to a greater extent than abused females, build an insulating wall around themselves to protect themselves from the opinions others have of them. The fact that they score so much lower on the Unintegrated expression (which relates to drive or need level) attests to the thoroughness of their insulation. This may be related to the fact that the

majority of the males are abused by another male and male homosexuality is particularly feared and stigmatized in our society. Male victims particularly fear that homosexual abuse has made them homosexual and their insulation from the opinions of others may relate to this fear.

If this data can be consistently replicated and is found to be generalizable beyond this sample it might offer a partial explanation of one of the dynamics of the child molester. A large percentage of molesters were themselves sexually abused as children (Fiore, 1985; Groth & Birnbaum, 1979). If one of the results of that experience resulted in their insulating themselves from the reactions and feelings of others it might contribute to the tearing down of one of the barriers to the commission of child sexual abuse. Not only would they be less concerned with societal feelings regarding child sexual abuse, but they would insulate themselves from the feelings of their victims.

Unanticipated Results. Another of the results of this study, this one unanticipated, may shed some light on the behavior of child sexual abuse victims when they reach adulthood. On the Assertiveness scale of the SMAT, female abuse victims were found to score significantly lower than non-abused females in the Unintegrated expression, and significantly lower than all other groups in the

Integrated and Total Motivation expressions. They would thus be likely to be more passive and less assertive than non-abused females.

If some male sexual abuse victims grow up to become child molesters, some female victims grow up to become revictimized or their children become victimized (Miller et al., 1978; Sgroi & Dana, 1982). This lack of assertiveness might contribute to their own revictimization or to the passiveness seen in the mothers of many incest victims who fail to protect their children adequately, in spite of knowledge or suspicions regarding the incest.

A few other results about which no hypotheses were formed are of interest. Abused subjects scored significantly higher on the Schizophrenia scale of the CAG. They are more likely to describe themselves as having strange impulses, feeling that the world is unsympathetic and that they are pushed around by other people. They are more likely to feel that they are of little importance to other people and to have difficulty getting their ideas into words. They also scored significantly higher on the Psychasthenia scale and are thus more likely to worry about things and have thoughts that they can't get out of their heads.

The Superego scale of the SMAT is described as being related to an uncompromising attachment to moral goals.

The test manual also notes, however, that for adolescents, there is substantial loading on pleasing the father.

Significant main effects for abuse were found on both the Integrated and the Total Motivation scores of this scale, indicating that abused subjects were less satisfied or exerted less effort in this area and that, overall, it was less important to them than it was to the non-abused subjects. Given the high number of victims who were abused by a father or stepfather, this result becomes very understandable.

Finally, the SMAT contains a scale that relates to heterosexual issues, the Mating scale. The abused subjects scored significantly higher on the Conflict score of this scale indicating that they feel much more conflicted over heterosexual issues than do non-abused subjects. Abused subjects also scored lower on the Integrated expression of this scale indicating they are more likely to feel less satisfaction or exert less effort than non-abused subjects in the area of heterosexual relationships.

Conclusions

The results of this study generally confirm the reported experience of the therapists who have worked with, interviewed and/or surveyed female sexual abuse victims and adds to our knowledge of male victims. Both male and female victims are depressed, guilty, fearful,

and suffer from low self-esteem. They also worry, feel anxious and are more conflicted over heterosexual issues. Overall they feel significant pain and are less happy with their lives than non-abused adolescents. These are the issues that are brought out in the literature on sexual abuse victims. It is noted that we are looking at the pathological side of the picture. The first half of the CAQ as noted above, is patterned after the 16-PF and has scales on normal personality traits but was not used for time considerations and to correlate the current study with the literature. It would be beneficial in the future if we looked at not just the negative side of the picture but we also used a device like the 16-PF to determine normal personality traits. Therapy with any client needs to build on that client's strengths, not just attack the problem areas. It could be very helpful to determine not just what's wrong with sexually abused adolescents but also what's good.

As noted above, the clear majority of the results of this study indicate that the sequelae of child sexual abuse are essentially similar for both male and female victims. There are two possible explanations for this finding. One is that the denial and repression experienced by males in the areas being tested where differences were anticipated, prevented their discovery with these instruments. This suggestion appears unlikely,

however, because the abused males did score significantly higher than the non-abused groups in essentially the same areas and to the same extent the abused females did. If the results are valid to determine differences between groups they should also be valid to determine the differences within groups.

A second possible explanation for the fact that abused males and females scored so similarly is the possibility that, to a great extent, sexual abuse has a threshold effect and that the results are similar in most respects for both males and females. Such an explanation is consistent with the data found in this study. This suggests that the feelings and internal consequences of the sexual abuse are similar although not identical for both males and females. However, this does not speak to how the subject reacts to those feelings. Males may outwardly respond very differently and may require different therapeutic techniques to deal with their feelings but the internal consequences that are correlated with the abuse may be quite similar for both males and females. It is possible that some of the differences that have been suggested in some of the literature are differences primarily in the mode of expression of the sequelae of the abuse rather than different sequelae per se, a distinction that would be difficult to discover in a survey or an anecdotal study.

Since sexually abused males and females appear to have such similar sequelae it is important that therapists recognize the apparent threshold effect of the abuse and gear their therapy with victims accordingly. There are indications that this may not currently be the case. Pierce and Pierce (1985) report that the group of sexually abused males in their study averaged only 16 hours in treatment as compared to an average of 39 hours in individual treatment in a separate survey of sexual abuse treatment centers. They report that this shorter period of time in therapy occurred in spite of the fact that the males were more likely than the females to complete therapy when it was recommended. They cannot explain this difference but include the possibilities that the family of the boy may have ended therapy early, the therapist may have felt less competent to work with the boys or that there may have been the perception that the males were less disturbed by the abuse than were the girls.

As can be seen from the current study, males are likely to suffer consequences similar to those of the females. Rather than concentrating on the expressed anger of the male victims and allowing it to hide the other sequelae it would probably be beneficial if they could be helped past the anger and could recognize and deal with the depression that underlies it. Sexually abused males are likely to be difficult therapy clients. The

insulating wall they build around themselves, the lack of concern over the thoughts and feelings others have of them, would likely make the establishment of a therapeutic bond difficult. Although this is probably the first goal of most therapists it would be a particularly important, though difficult, goal for therapy with sexually abused male adolescents. Many questions still remain, particularly regarding the male victim. If future studies confirm these findings regarding the sequelae of sexual abuse for male victims we will still be left with a number of pressing problems. One such problem is how to develop methods to make it easier for the male victim to report his victimization. This will probably prove to be quite difficult since the primary reasons they fail to report appear to be culturally related. Such issues are very resistant to change. Even when he has reported his victimization (or, more likely, it has been discovered) the male victim has been found to be quite resistant to therapy. There is an urgent need for therapeutic techniques that can be used effectively with adolescent male victims. Although male victims may present very differently in therapy and it is certainly helpful to the therapist to understand what her or his client is likely to be experiencing, it is a separate issue to possess the requisite techniques to

assist that client to develop an awareness of their own experience and to deal effectively with it. Much remains to be done but to the extent we can recognize and begin to work on the issues, to that extent we have begun to progress toward resolution.

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